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CONFIRMATION NO. 2832

<b>SERIAL NUMBER</b> 09/832,273	<b>FILING OR 371(c) DATE</b> 04/10/2001 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> 05339-014003
<b>APPLICANTS</b> Roland Cherif-Cheikh, Barcelona, SPAIN;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/110,773 07/06/1998 PAT 6,213,983 which is a CON of 08/777,634 12/31/1996 PAT 5,776,107				
<b>** FOREIGN APPLICATIONS *****</b> <i>none</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/03/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		<b>STATE OR COUNTRY</b> SPAIN	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 21
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> 37903				
<b>TITLE</b> Safety injection device for a liquid or semi-solid composition				
<b>FILING FEE RECEIVED</b> 858	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	